

Napa County Subsidized Child Care & Development Eligibility List Application

Administered by:
Community Resources for Children
3299 Claremont Way, Suite 1
Napa, CA 94558
Phone: (707) 253-0376 x118 Fax: (707) 253-2735

Please complete both sides of this
form and return it to:

Napa County Office of Education/NPP
74 Wintun Ct., Napa, CA 94558
707-253-6915 (English) Phone/Text/Fax
707-346-5717 (Spanish)
jfridolfs@napacoe.org

The following programs participate to make applying for subsidized child care easier for families. Using internet technologies, a centralized listing of all applicants is kept in a data base that is shared by all agencies, saving time and expanding opportunities. Significant precautions have been taken to assure the confidentiality of your information, but no system, whether electronic or paper, is fool proof. By signing this form you acknowledge and grant permission for your information to be shared in this way, and release the agencies involved from wrong doing should security systems be breached.

This information will be shared with the following programs that provide preschool/childcare services to families.

- Community Resources for Children
- CANV Kids Development & Family Program
- Napa County Office of Education
- Napa Valley College
- Napa County Health and Human Services.

I hereby certify that the following information is true and correct to the best of my knowledge and give my permission to share this application with the programs listed above.

Parent/Guardian Signature: _____ **Date:** _____

Parent/Guardian Information

1st Parent

Mother Father Guardian Other _____

2nd Parent (only if living in the same household)

Mother Father Step Parent Guardian Other

First Name				First Name						
Last Name				Last Name						
Address				SAME AS PARENT/GUARDIAN ONE						
City & Zip				SAME AS PARENT/GUARDIAN ONE						
Home Phone		Best time to call:		SAME AS PARENT/GUARDIAN ONE						
Work Phone		Can you be contacted by text? Y__N__		Work Phone						
Date of Birth				Date of Birth						
E-mail address										
Have You Received ... (check all that apply)	AFDC or TANF in the last two years?		Y	N	AFDC or TANF in the last two years?		Y	N		
	Cash Aid for yourself?				Cash Aid for yourself?					
	Cash Aid for your child?				Cash Aid for your child?					
Are You ...		Enrolled in CalWORK's ?				Enrolled in CalWORK's ?				
Are You ... (check all that apply)		Y	N		Y	N		Y	N	
	Homeless ?				Looking for Work?					
	Incapacitated ?				In School / Training?					
	A teen parent ?				Employed?					
Name of School or Training Program		Zip Code:		Name of School or Training Program		Zip Code:				
Name of Employer		Zip Code:		Name of Employer		Zip Code:				
Gross Monthly Income (before taxes) Include income from all sources: employment, unemployment, child support received, cash aid, etc. \$				Gross Monthly Income: Include all sources: employment, unemployment, child support received, cash aid, etc. \$						
Do You Pay Child Support to Another Household? (not child care) Amount \$		Y	N	Do you pay child support to another household Amount \$		Y	N			
How Many Children Are You Financially Responsible for Living in Your Household, Under the Age of 18?				Total Gross Monthly Income of Both Parents Amount \$						

Child Information

Please enter information for all children living at home, under the age of 18,
Even if child does NOT need care

ID#	First Name	Last Name	Date of Birth	Does Child Need Care?	Please Check All Days That Care Is Needed
Child # 1			/ /	Y <input type="checkbox"/> N <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> M T W T F S S
M/F? M <input type="checkbox"/> F <input type="checkbox"/>	Does Child Have Special Needs? Y <input type="checkbox"/> N <input type="checkbox"/> Please Explain:		Name of Child's School		Is Child Now Receiving Subsidized Care or Head Start? Y <input type="checkbox"/> N <input type="checkbox"/>
			GRADE LEVEL:		WHERE?
This child can receive care at: Please check all acceptable locations					
<u>NCOE - Part Day Preschools - Napa</u> <input type="checkbox"/> Dos Mundos (McPherson) Preschool <input type="checkbox"/> Phillips Charter Preschool <input type="checkbox"/> Shearer Preschool		<u>NCOE - Part Day Preschools</u> <input type="checkbox"/> Sattui Preschool-Calistoga <input type="checkbox"/> Napa Junction Preschool		<u>Full Day Preschool/ Child Care</u> <input type="checkbox"/> CANV Kids - Myrtle Ave <input type="checkbox"/> CANV Kids – Old Sonoma Rd <input type="checkbox"/> Sattui Preschool-Calistoga <input type="checkbox"/> Napa Preschool Program <input type="checkbox"/> Napa Valley College	

ID#	First Name	Last Name	Date of Birth	Does Child Need Care?	Please Check All Days That Care Is Needed
Child # 2			/ /	Y <input type="checkbox"/> N <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> M T W T F S S
M/F? M <input type="checkbox"/> F <input type="checkbox"/>	Does Child Have Special Needs? Y <input type="checkbox"/> N <input type="checkbox"/> Please Explain:		Name of Child's School		Is Child Now Receiving Subsidized Care or Head Start? Y <input type="checkbox"/> N <input type="checkbox"/>
			GRADE LEVEL:		WHERE?
This child can receive care at: Please check all acceptable locations					
<u>NCOE - Part Day Preschools - Napa</u> <input type="checkbox"/> Dos Mundos (McPherson) Preschool <input type="checkbox"/> Phillips Charter Preschool <input type="checkbox"/> Shearer Preschool		<u>NCOE - Part Day Preschools</u> <input type="checkbox"/> Sattui Preschool-Calistoga <input type="checkbox"/> Napa Junction Preschool		<u>Full Day Preschool/ Child Care</u> <input type="checkbox"/> CANV Kids - Myrtle Ave <input type="checkbox"/> CANV Kids – Old Sonoma Rd <input type="checkbox"/> Sattui Preschool-Calistoga <input type="checkbox"/> Napa Preschool Program <input type="checkbox"/> Napa Valley College	

ID#	First Name	Last Name	Date of Birth	Does Child Need Care?	Please Check All Days That Care Is Needed
Child # 3			/ /	Y <input type="checkbox"/> N <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> M T W T F S S
M/F? M <input type="checkbox"/> F <input type="checkbox"/>	Does Child Have Special Needs? Y <input type="checkbox"/> N <input type="checkbox"/> Please Explain:		Name of Child's School		Is Child Now Receiving Subsidized Care or Head Start? Y <input type="checkbox"/> N <input type="checkbox"/>
			GRADE LEVEL:		WHERE?
This child can receive care at: Please check all acceptable locations					
<u>NCOE - Part Day Preschools - Napa</u> <input type="checkbox"/> Dos Mundos (McPherson) Preschool <input type="checkbox"/> Phillips Charter Preschool <input type="checkbox"/> Shearer Preschool		<u>NCOE - Part Day Preschools</u> <input type="checkbox"/> Sattui Preschool-Calistoga <input type="checkbox"/> Napa Junction Preschool		<u>Full Day Preschool/ Child Care</u> <input type="checkbox"/> CANV Kids - Myrtle Ave <input type="checkbox"/> CANV Kids – Old Sonoma Rd <input type="checkbox"/> Sattui Preschool-Calistoga <input type="checkbox"/> Napa Preschool Program <input type="checkbox"/> Napa Valley College	